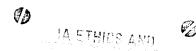
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073





FOR INSTRUCTIONS, SEE BACK OF FORM

Fax: 515-281-4073	DISCLOSURE SUMMARY PAGE		2	2008 SEP -3 AM 10: 44	
COMMITTEE NAME (Must be	e same as on Statement of Org	ganization)			
ANKENY PARENT	13' ASSOCIATION		1 1	FORM	
IMPORTANT: Indicate by # type (1)Statewide/Legislative/Judge 5 (4)County Central Committee (5	of committee you are reporting for Standing for Retention Candidate 5)County Candidate (6)City Can	: []] (2)State PAC (3)State Party didate (7)School Board or Other Political I Board or Other Political Subdivision PAC	(E	DR-2 Rev. 07/2007) DISCLOSURE REPORT Or Office Use Only Domm. #	
CANDIDATE COMMITTEES Candidate Name	ONLY:	Political Party (if applicable)	Lo So	ogged Inoannedomputer	
Office Sought		District (if Senate or House)		udited	
Late reports are subject to possil	ble civil and criminal penalties. F	ursuant to Iowa Code sections 68B.32A	(7) and 68.	A.401(3), the candidate, for a	
Sarah L	· Auba	965-8340		x12910X	
SIGNATURE OF PERSON FIL		965-8340 TELEPHONE		DATE SIGNED	
		REPORT FOR (1) ELECTION		ELECTION YEAR.	
•	eport date)	Indicate by #	<u> </u>		
☐CHECK IF AMENDMENT TO	O REPORT DATED		Local Comr	mittees, enter Date of Election	
	o file reports until a DR-3 is file	d.)	County & Lowhich Elect	ocal Committees, enter County in ion is held	
STATEM CASH ON HAND at the beginn	ENT OF CASH ON HAN				
committee. This amo	ount MUST be the same as the		\$		
ADD TOTAL MONEY	TAKEN IN THIS PERIOD				
Schedule A: Cash Co	ontributions total (Attach Sche	dule A) (*also see in-kind below)		1380.00	
Schedule F: Loans R	Received total (Attach Schedule	9 F)			
Schedule H: Total Sa	ales of Campaign Property (At	ach Schedule H)			
(Schedule H	l applies to Candidates' Com	nmittees Only)			
		SUB-TOTAL	\$		
SUBTRACT TOTAL	MONEY SPENT THIS PERIO	D			
Schedule B: Expende	itures total (Attach Schedule B) (**also see debts and loans below)		271.00	
Schedule F: Loan Re	epayments total (Attach Sched	ule F)			
CASH ON HAND at the end of	this reporting period (if final re	port balance must be zero)	\$	1109.00	
**UNPAID BILLS (From Sched	lule D - Attach Schedule D)		\$		
*IN KIND CONTRIBUTIONS (F	From Schedule E - Attach Sche	edule E)	\$		
**OUTSTANDING LOANS (Fro	om Schedule F - Attach Sched	ule F)	\$		
CONSULTANT BREAKDOWN			<u>-</u>		
CANDIDATE COMMITTEES O	NLY:			_ 	
VALUE OF CAMPAIGN PROP	ERTY (From Schedule H - Att	ach Schedule H)	\$		

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
. —	CK THIS BOX IF

		be same as on Statement of Organization)	-
ANKENY	PARENTS	ASSOCIATION	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
श्रीकाल	ID# Ск# 1317	CLAHAD TIZAMIP TRYSHA 1518 NE MICHAEZ ANKENY 14 50021		\$ 100.00	
e 1e ce	CK# 426	MARIA KINGI SCHWEERS BIO NE KEYSTONE DR. ANKENY IA SOCII		100.00	
6/19/08	CK# 1,2c4	SARAH RUBA 1005 NE ETECT. ANKENY IA SCOOL		50.00	
8/19/08	CK# &GD	BRAIN GILLETTE 2001 NE INNSEROLL DE ANKENYIA SCOLI		50.00	
8/19/08	CK# 1/185611	ANN AT CHLL 515 NE 2416CT. ANKENY H 50021		100.00	
elialee	ск# 3314	LISA LAJOIE SCZ NE 4301CT. ANKENY 1A SOOJI		35.00	
8/23/08	ID# CK#755	ANN WRIGHT 123 NW WESTWOOD ST. ANKENY IA 50021		50.00	
6/26/08	ID#	UNITEMIZED CONTRIBUTIONS		45.00	
6/27/08	ID# CK# 5248	ACCOMOLD 1711 SE CRALABOR RD. ANKENY 17 50001		100.00	
8/27/08	ID# CK# 5921	JANE FUNK 1006 NE STACT, ANKENY 14 SOOZI		100.00	
			SUB-TOTAL		

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2 (for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

(morading candidate's personal funds)	
PARENTS ASSOCIATION	CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
8/28/08	ID# Ск# 4012	CARMINE BOM 32CT SWITTIMBELLIFEINED ANKENY, IA 50033		\$ 50.00	
8/20/08	CK# 3045	ATRON JOHNSON TOL NE MICHAEL DR ANKENY LA SCOOL		100,00	
<u>୍ରୀହୀଙ୍</u>	ю# Ск# 9001	LESLIE PETERSEN 1922 NE CAMERON DR. ANKENY IA SOOJI		100,00	
6/26/08	CK# 5117	TRENT MURPHY 9507 NW CHERRY CHENCHINE POLKCITY IA SEDAL		100.00	
8/28/08	CK# (318	JAMES MURPHY 1623 NW 4TH ST ANKENY 1A SOOF3		50.00	
8/29/08	ID# CK# 36146	KIMBERLEY DIVEROFMENT CORP. P.O. BOX 369 ANKENY, IA SOUST		250.00	
	CK#				
			SUB-TOTAL	. 150 00	

TOTAL (if last page of this schedule)

\$1380.00

SCHEDULE

(Rev. 07/03)

MONETARY

RECEIPTS

Page 2 of 2 (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

(100)			200
16	33.37		
	17.000	in the said of	- A4

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES			
CHECK THIS BOX IF AMENDING FORM				

COMMITTEE NA	ME (Must be sa	ame as on Statement of Organization)
ANKENY	PARENTS	ASSOCIATION

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/29/08	ID# CK# 93	PC PRINT	PRINTING OF FLYERS	\$ 271.00
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	***		SUB-TOTAL	\$ 271.00
			TOTAL (if last page of this schedule)	\$ 3-11

IOTAL (If last page of this schedule)

\$ 271.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Dans	i		1
Page	!	of	